Seattle Hempfest Cancellation Request Form.

**Submit to:** **vending@hempfest.org** **no later than June 1, 2014. There are no cancellations after this date!**

DATE

BUSINESS NAME

NAME

EMAIL

PHONE

REASON FOR CANCELLATION:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QTY** | **UNIT COST** | **TOTAL COST** | **30% CANCELLATION FEE** | **REFUND (TOTAL - 30%)** |
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 Total Refund

I understand that cancellations are only accepted through June 1, 2014 and are all subject to a 30% cancellation fee. All refund requests must be received in writing on this form via email to vending@hempfest.org or mailed to: Hempfest Central 12351 Lake City Way NE #102 Seattle, Wa 98125 (206)-36-4HEMP.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_